

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 2 OF 7  
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)  
 Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties

Full Name (Last, First, Middle Initial) of Payee San Luis Obispo New Times		Date MM / DD / YYYY 05 / 20 / 2010
Mailing Address 1010 Marsh Street		Amount 88.00
City San Luis Obispo	State CA	
Purpose of Expenditure Newspaper Ad	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23
Name of Federal Candidate Supported or Opposed by Expenditure: Lois Capps		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 724.80		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Santa Barbara Independent Inc.		Date MM / DD / YYYY 05 / 20 / 2010
Mailing Address 122 W. Figueroa		Amount 116.50
City Santa Barbara	State CA	
Purpose of Expenditure Newspaper Ad	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23
Name of Federal Candidate Supported or Opposed by Expenditure: Barbara Boxer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 721.60		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Santa Barbara Independent Inc.		Date MM / DD / YYYY 05 / 20 / 2010
Mailing Address 122 W. Figueroa		Amount 116.50
City Santa Barbara	State CA	
Purpose of Expenditure Newspaper Ad	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23
Name of Federal Candidate Supported or Opposed by Expenditure: Lois Capps		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 724.80		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures .....	321.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures ..... (carry total from last page forward to Line 7)	

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